PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032

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## FEE TRANSMITTAL Filing Date **For FY 2009**

Mitsunori Miki First Named Inventor T. X. Le **Examiner Name** 2821 Applicant claims small entity status. See 37 CFR 1.27 Art Unit

TOTAL AMOUNT OF PAYMEN	IT	(\$) 1,822.0	)0 At	tomey Docket	No.	IRD-0011		
METHOD OF PAYMENT	(check all t	hat apply)	· · -					
Check Credit Ca		Money Order	None -0013	· ·	please identif	y): : Rader, Fish	man & Grau	ier PLLC
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For the above-identi	-		virector is ne	رست ا	•			. Elling for
X Charge fee(s)  X Charge any ad fee(s) under 37	ditional fee(	s) or underpay	ments of		any overpa	licated below, e ayments	xcept for the	a ming lee
FEE CALCULATION					<del> </del>			•
1. BASIC FILING, SEARCH	, AND EXAM	INATION FE	ES		-			,
	FILIN	G FEES	SEAR	CH FEES Small Entity	EXAMIN	IATION FEES	<b>}</b>	
<b>Application Type</b>	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85	<u> </u>	
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0	•	
2. EXCESS CLAIM FEES								mall Entity
Fee Description Each claim over 20 (including	ng Reissues	)					<u>Fee (\$)</u> 52	<u>Fee (\$)</u> 26
Each independent claim ove Multiple dependent claims	r 3 (includir	ng Reissues)					220 390	110 195
Total Claims Ext	<u>Total Claims</u> Extra Claims Fee (\$)		Fee Paid (\$)		<u>M</u>	lultiple Dependent Claims		
51 - 51 or HP  HP = highest number of total clair	x ns paid for, if g	reater than 20.		·	<u>Fe</u>	e (\$)	Fee Pald (\$)	
Indep. Claims Ext	ra Claims x	Fee (\$)	Fee F	Paid (\$)				-
HP = highest number of independ	ent claims paid	for, if greater tha	n 3.	<del> </del>				
3. APPLICATION SIZE FEE If the specification and dra listings under 37 CFR 1 sheets or fraction thereo	wings excee .52(e)), the	application siz	e fee due is	\$270 (\$135 f	•	•	-	
	tra Sheets	<u>Number</u> /50 =		ional 50 or frac			Fee Pa	ald (\$)
4. OTHER FEE(S)				<b>*</b>		<del></del>	Fees P	'aid (\$)
Non-English Specification	on, \$130 fe	e (no small en	tity discoun	t)				
Other (e.g., late filing surcharge): 1501 Utility issue fee							1,510.00	
1504 Publication fee for early, voluntary, or normal 8001 Printed copy of patent w/o color						300.00 12.00		

SUBMITTED BY	1/2					
Signature			Registration No. (Attorney/Agent)	47,255	Telephone	(202) 955-3750
Name (Print/Type	Brian K. Dut	ton			Date	November 3, 2009

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Silver 10/00 model				Complete if Known					
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Nun	nber 1	10/567,081-Conf. #2325			
FEE TRANSMITTAL				Filing Date		February 3, 2006			
				First Named Inv	rentor N	Mitsunori Miki			
For FY 2009				Examiner Name	·····	T. X. Le			
Applicar	nt claims small entity state	us. See 37 CFR 1.27	ı	Art Unit 2821					
TOTAL AMOUN	TOTAL AMOUNT OF PAYMENT (\$) 1,822.00			Attorney Docket	No.	RD-0011			
METHOD OF	PAYMENT (check	all that apply)					_		
Check	Credit Card	Money Order	Non	e Other (	please identify	):			
x Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC									
For the	above-identified depo	sit account, the Dire	ctor is	hereby authorize	ed to: (checl	k all that apply)			
1 —	charge fee(s) indicated				•	cated below, ex	cept for t	he filing fee	
	harge any additional fee(s) under 37 CFR 1.		ents of	x Credit	any overpa	yments	_		
FEE CALCU	LATION	<del></del>				-			
1. BASIC FILIN	IG, SEARCH, AND EX	KAMINATION FEES				<del></del>			
	FIL	ING FEES	SEA	ARCH FEES	<b>EXAMIN</b>	ATION FEES			
Application T	ype Fee (\$	Small Entity Fee (\$)	ee (\$)	Small Entity Fee (\$)	Fee_(\$)	Small Entity Fee (\$)	Fees !	Paid (\$)	
Utility	330	165	540	270	220	110	77		
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
	220	110	0	0	0.50	0	•		
Provisional		110	U	U	0 .	U		0	
2. EXCESS CL		·					Fee (\$)	Small Entity Fee (\$)	
Fee Description Each claim ove	•	ues)					52	26	
						110			
Multiple depen	•	3					390	195	
Total Claims	Extra Claims	Fee (\$)	Fe	ee Paid (\$) Multiple Depender					
51 -51 or HP x =							ee Paid (\$		
HP = highest num	nber of total claims paid for,	if greater than 20.			-			<b>-</b>	
Indep. Claims	Extra Claims	· <del></del> -	Fe	e Paid (\$)		<del></del>	**************************************	_	
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_	nber of independent claims	paid for, if greater than 3.	•						
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
_	der 37 CFR 1.52(e)), traction thereof. See 3			•	or small ent	ity) for each ad	ditional 50	D	
Total Sheet	ts Extra Sheets	Number of e	ach ac	lditional 50 or frac	tion thereof	Fee (\$)	<u>Fee</u>	Paid (\$)	
	100 =	/50 =		(round up to a who	le number) x	=	} 		
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1501 Utility issue fee 1,510.00 1504 Publication fee for early, voluntary, or normal 300.00									
1504 Publication fee for early, voluntary, or normal 300.00 8001 Printed copy of patent w/o color 12.00									
SUBMITTED BY	13		T	Registration No.	47 OEE	Tologhan	/202\ 05		
Signature	Driver V. D.			(Attorney/Agent)	47,255	Telephone	(202) 95		
Name (Print/Type)	Brian K. Dutton					Date N	lovember	3, 2009	

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